

A-72194/ENB  
449346-98  
03-097

**CERTIFICATE OF MAIL UNDER 37 C.F.R. 1.10**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on October 10, 2006.

Signed:

  
Laura Mosier

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Stephen P. MANGIN, *et al.*

Application No. 10/696,845

Filed: October 29, 2003

For: APPARATUS WITH VISUAL MARKER  
FOR GUIDING DEPLOYMENT OF  
IMPLANTABLE PROSTHESIS

Art Unit: 3738

Examiner: PRONE, Christopher D.

Date: October 10, 2006

**PETITION FOR EXTENSION OF PERIOD FOR RESPONSE**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.136(a), Applicants hereby petition for an extension of one (1) month within which to respond to the Final Official Action mailed June 7, 2006, bringing the period for response to October 7, 2006 (Saturday).

The extension fee of \$120 for a Large Entity is included in the Fee Transmittal Sheet.

Please charge any additional fees or credit any overpayment to our Deposit Account No. 50-2319 (Order No. A-72194/ENB (449346-98)).

Date: October 10, 2006

Respectfully submitted,

DORSEY & WHITNEY LLP



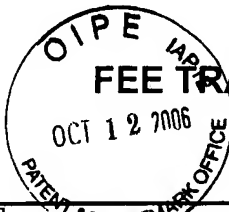
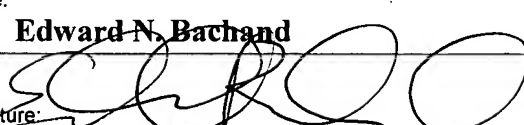
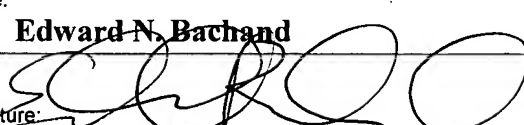
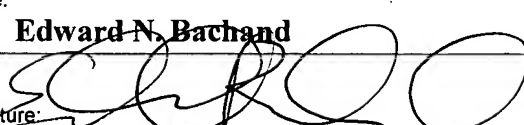
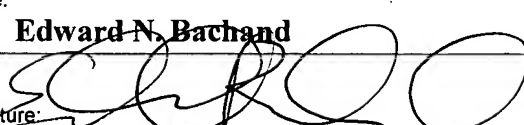
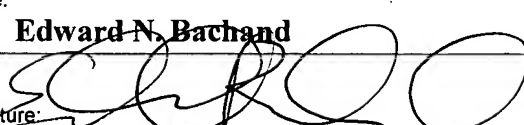
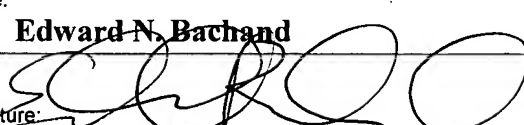
Edward N. Bachand

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4834-4473-5233\1

01 FC:1251

120.00 OP

|  <b>FEE TRANSMITTAL SHEET (FY 2005)</b>   |                      | Complete if Known  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
|---|----------------------|--|-------------------------|---------------------------------|----------------------|---|----------|--|-----|---------------------------|-------------------------|--|-----|------------------|------------------------|-------------------|---------------------------|----|----|--|------|-----------------------------|----|--|-------|-----------|----------------|---|--|-------|-----|--|--|-------|-----|---|--|-------|-------|--|--|-----|-----|------------------------------|--|-----|-----|------------------|--|-----|-----|--|--|-------|-----|--------------------------|--|-----|----|-------------------------|--|-----|-----|------------------|--|-----|-----|---|--|-----|--|--|--|-----|-----|----------------------------------|--|-------|-----|------------------------------------|--|-----|--|-----------------------------------|--|-----|--|---|--|-------|--|-----------------------------|--|---------------------|--|--|--|-----------------------------------|--|--|--------------|---------------------------------|--|--|--------------|--|--|--|--|---------------------------------|----------------------|---|--|-----------------------------------|--|---------------------------|-------------------------|--|--|------------------|------------------------|
| <input type="checkbox"/> Application is small entity status (see 37 C.F.R. 1.27)  |                      | Application No.  | 10/696,845              |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>METHOD OF PAYMENT (Check One)</b><br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order<br><input type="checkbox"/> Deposit Account No.:<br>Deposit Account Name: <b>DORSEY &amp; WHITNEY LLP</b><br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge any additional fees or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17<br><input type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Other (please identify):  |                      | Filing Date  | October 29, 2003        |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>Extra Claim Fees</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Current Claims</th> <th>Prior</th> <th>Extra</th> <th>Fee</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total 29</td> <td>- 29</td> <td>= 0</td> <td>x \$</td> <td>= \$</td> </tr> <tr> <td>Ind. 3</td> <td>- 3</td> <td>= 0</td> <td>x \$</td> <td>= \$</td> </tr> <tr> <td colspan="3">Multiple Dependent Claims</td> <td>x \$</td> <td>= \$</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>Total (Extra Claims)</b></td> <td></td> <td><b>\$</b></td> </tr> </tbody> </table>   |                      | Current Claims   | Prior                   | Extra                           | Fee                  | Fee Paid  | Total 29 | - 29   | = 0 | x \$                      | = \$                    | Ind. 3   | - 3 | = 0              | x \$                   | = \$              | Multiple Dependent Claims |    |    | x \$   | = \$ | <b>Total (Extra Claims)</b> |    |  |       | <b>\$</b> | First Inventor | Stephen P. MANGIN                       |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Current Claims  | Prior                | Extra  | Fee                     | Fee Paid                        |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Total 29  | - 29                 | = 0  | x \$                    | = \$                            |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Ind. 3  | - 3                  | = 0  | x \$                    | = \$                            |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Multiple Dependent Claims   |                      |  | x \$                    | = \$                            |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>Total (Extra Claims)</b>   |                      |  |                         | <b>\$</b>                       |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>Petition Fee Under 37 CFR 1.17(f), (g), &amp; (h)</b><br>Enclosed is a Petition filed under 37 CFR as indicated below:<br><input type="checkbox"/> Petition Fee under 37 CFR 1.17(f) <b>Fee \$400</b><br>§ 1.53(e) to accord a filing date.<br>§ 1.57(a) to accord a filing date.<br>§ 1.182 for decision on a question not provided for.<br>§ 1.183 to suspend the rules.<br>§ 1.378(e) for reconsideration of decision on petition refusing delayed payment of maintenance fee in expired patent.<br>§ 1.174(b) to accord a filing date to an application under § 1.740 for extension of patent term.<br><input type="checkbox"/> Petition Fee under 37 CFR 1.17(g) <b>Fee \$200</b><br>§ 1.12 for access to an assignment record.<br>§ 1.14 for access to an application.<br>§ 1.47 for filing by other than all inventors or person not the inventor.<br>§ 1.59 for expungement of information.<br>§ 1.103(a) to suspend action in an application.<br>§ 1.136(b) for review of a request for ext. of time when § 1.136(a) not avail.<br>§ 1.295 for review of refusal to publish a statutory invention registration.<br>§ 1.296 to withdraw a req. for pub. after notice of intent to publish issued.<br>§ 1.377 for review of decision refusing to accept a maintenance fee filed prior to expiration of a patent.<br>§ 1.550(c) for request for ext. of time in <i>ex parte</i> reexam. proceedings.<br>§ 1.956 for request for ext. of time in <i>ex parte</i> reexam. proceedings.<br>§ 5.12 for expedited handling of foreign filing license.<br>§ 5.15 for changing the scope of a license.<br>§ 1.5.25 for retroactive license.<br><input type="checkbox"/> Petition Fee under 37 CFR 1.17(h) <b>Fee \$130</b><br>§ 1.19(g) to request documents in a form other than provided in this part.<br>§ 1.84 for accepting color drawings or photographs.<br>§ 1.91 for entry of a model or exhibit.<br>§ 1.102(d) to make an application special.<br>§ 1.138(c) to expressly abandon an application to avoid publication.<br>§ 1.313 to withdraw an application from issue.<br>§ 1.314 to defer issuance of a patent.  |                      | Group Art Unit   | 3738                    |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee paid</th> </tr> </thead> <tbody> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Surcharge - Late nonprovisional filing fee or oath</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>40</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>120</td> <td>60</td> <td>Extension for reply within first month</td> <td>\$120</td> </tr> <tr> <td>450</td> <td>225</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1,020</td> <td>510</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1,590</td> <td>795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2,160</td> <td>1,080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>Submission After Final 1.129</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1,000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>800</td> <td>400</td> <td>Design Issue Fee</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>130</td> <td></td> <td>Request for voluntary publication or republication</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Petition to Revive - unavoidable</td> <td></td> </tr> <tr> <td>1,500</td> <td>750</td> <td>Petition to Revive - unintentional</td> <td></td> </tr> <tr> <td>200</td> <td></td> <td>Filing for patent term adjustment</td> <td></td> </tr> <tr> <td>400</td> <td></td> <td>Request for reinstatement of term reduced</td> <td></td> </tr> <tr> <td>1,120</td> <td></td> <td>Extension of term of patent</td> <td></td> </tr> <tr> <td colspan="4">OTHER FEE (specify)</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>Subtotal (Additional Fees)</b></td> <td><b>\$120</b></td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>Total Amount of Payment:</b></td> <td><b>\$120</b></td> </tr> <tr> <td colspan="4">           Submitted by:           <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">CUSTOMER NUMBER<br/><b>32940</b></td> <td style="width: 25%;">DORSEY &amp; WHITNEY LLP</td> <td colspan="2">555 California Street, Suite 1000<br/>San Francisco, CA 94104-1513</td> </tr> <tr> <td colspan="2">Name:<br/><b>Edward N. Bachand</b></td> <td>Phone No.: (650) 857-1717</td> <td>Fax No.: (650) 857-1288</td> </tr> <tr> <td colspan="2">Signature: </td> <td>Reg. No.: 37,085</td> <td>Date: October 10, 2006</td> </tr> </table> </td> </tr> </tbody> </table> |                      | Large Entity Fee   | Small Entity Fee        | Fee Description                 | Fee paid             | 50  | 25       | Surcharge - late provisional filing fee or cover sheet |     | 130                       | 65                      | Surcharge - Late nonprovisional filing fee or oath   |     | 180              | 180                    | Submission of IDS |                           | 40 | 40 | Recording each patent assignment per property (times number of properties) |      | 120                         | 60 | Extension for reply within first month | \$120 | 450       | 225            | Extension for reply within second month |  | 1,020 | 510 | Extension for reply within third month |  | 1,590 | 795 | Extension for reply within fourth month |  | 2,160 | 1,080 | Extension for reply within fifth month |  | 790 | 395 | Submission After Final 1.129 |  | 500 | 250 | Notice of Appeal |  | 500 | 250 | Filing a brief in support of an appeal |  | 1,000 | 500 | Request for oral hearing |  | 130 | 65 | Terminal Disclaimer Fee |  | 800 | 400 | Design Issue Fee |  | 790 | 395 | Request for Continued Examination (RCE) |  | 130 |  | Request for voluntary publication or republication |  | 500 | 250 | Petition to Revive - unavoidable |  | 1,500 | 750 | Petition to Revive - unintentional |  | 200 |  | Filing for patent term adjustment |  | 400 |  | Request for reinstatement of term reduced |  | 1,120 |  | Extension of term of patent |  | OTHER FEE (specify) |  |  |  | <b>Subtotal (Additional Fees)</b> |  |  | <b>\$120</b> | <b>Total Amount of Payment:</b> |  |  | <b>\$120</b> | Submitted by: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">CUSTOMER NUMBER<br/><b>32940</b></td> <td style="width: 25%;">DORSEY &amp; WHITNEY LLP</td> <td colspan="2">555 California Street, Suite 1000<br/>San Francisco, CA 94104-1513</td> </tr> <tr> <td colspan="2">Name:<br/><b>Edward N. Bachand</b></td> <td>Phone No.: (650) 857-1717</td> <td>Fax No.: (650) 857-1288</td> </tr> <tr> <td colspan="2">Signature: </td> <td>Reg. No.: 37,085</td> <td>Date: October 10, 2006</td> </tr> </table> |  |  |  | CUSTOMER NUMBER<br><b>32940</b> | DORSEY & WHITNEY LLP | 555 California Street, Suite 1000<br>San Francisco, CA 94104-1513 |  | Name:<br><b>Edward N. Bachand</b> |  | Phone No.: (650) 857-1717 | Fax No.: (650) 857-1288 | Signature:  |  | Reg. No.: 37,085 | Date: October 10, 2006 |
| Large Entity Fee  | Small Entity Fee     | Fee Description  | Fee paid                |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 50  | 25                   | Surcharge - late provisional filing fee or cover sheet                     |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 130   | 65                   | Surcharge - Late nonprovisional filing fee or oath                         |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 180   | 180                  | Submission of IDS  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 40  | 40                   | Recording each patent assignment per property (times number of properties) |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 120   | 60                   | Extension for reply within first month                                     | \$120                   |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 450   | 225                  | Extension for reply within second month                                    |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 1,020   | 510                  | Extension for reply within third month                                     |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 1,590   | 795                  | Extension for reply within fourth month                                    |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 2,160   | 1,080                | Extension for reply within fifth month                                     |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 790   | 395                  | Submission After Final 1.129   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 500   | 250                  | Notice of Appeal   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 500   | 250                  | Filing a brief in support of an appeal                                     |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 1,000   | 500                  | Request for oral hearing   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 130   | 65                   | Terminal Disclaimer Fee  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 800   | 400                  | Design Issue Fee   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 790   | 395                  | Request for Continued Examination (RCE)                                    |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 130   |                      | Request for voluntary publication or republication                         |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 500   | 250                  | Petition to Revive - unavoidable   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 1,500   | 750                  | Petition to Revive - unintentional   |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 200   |                      | Filing for patent term adjustment  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 400   |                      | Request for reinstatement of term reduced                                  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| 1,120   |                      | Extension of term of patent  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| OTHER FEE (specify)   |                      |  |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>Subtotal (Additional Fees)</b>   |                      |  | <b>\$120</b>            |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| <b>Total Amount of Payment:</b>   |                      |  | <b>\$120</b>            |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Submitted by: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">CUSTOMER NUMBER<br/><b>32940</b></td> <td style="width: 25%;">DORSEY &amp; WHITNEY LLP</td> <td colspan="2">555 California Street, Suite 1000<br/>San Francisco, CA 94104-1513</td> </tr> <tr> <td colspan="2">Name:<br/><b>Edward N. Bachand</b></td> <td>Phone No.: (650) 857-1717</td> <td>Fax No.: (650) 857-1288</td> </tr> <tr> <td colspan="2">Signature: </td> <td>Reg. No.: 37,085</td> <td>Date: October 10, 2006</td> </tr> </table>  |                      |  |                         | CUSTOMER NUMBER<br><b>32940</b> | DORSEY & WHITNEY LLP | 555 California Street, Suite 1000<br>San Francisco, CA 94104-1513 |          | Name:<br><b>Edward N. Bachand</b>                      |     | Phone No.: (650) 857-1717 | Fax No.: (650) 857-1288 | Signature:  |     | Reg. No.: 37,085 | Date: October 10, 2006 |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| CUSTOMER NUMBER<br><b>32940</b>   | DORSEY & WHITNEY LLP | 555 California Street, Suite 1000<br>San Francisco, CA 94104-1513          |                         |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Name:<br><b>Edward N. Bachand</b>   |                      | Phone No.: (650) 857-1717  | Fax No.: (650) 857-1288 |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |
| Signature:   |                      | Reg. No.: 37,085   | Date: October 10, 2006  |                                 |                      |   |          |  |     |                           |                         |  |     |                  |                        |                   |                           |    |    |  |      |                             |    |  |       |           |                |   |  |       |     |  |  |       |     |   |  |       |       |  |  |     |     |                              |  |     |     |                  |  |     |     |  |  |       |     |                          |  |     |    |                         |  |     |     |                  |  |     |     |   |  |     |  |  |  |     |     |                                  |  |       |     |                                    |  |     |  |                                   |  |     |  |   |  |       |  |                             |  |                     |  |  |  |                                   |  |  |              |                                 |  |  |              |  |  |  |  |                                 |                      |   |  |                                   |  |                           |                         |  |  |                  |                        |